

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)

FERNANDO F. LOPEZ

Mailing Address 132 DORADO BEACH EAS

City State Zip Code
DORADO PR 00646

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 1 / 2 0 0 7

Transaction ID: 19488284

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

THOMAS E. MURPHY

Mailing Address 4920 MILL CREEK RD

City State Zip Code
DALLAS TX 75244

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 7

Transaction ID: 19492261

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

GARY E. LEWIS

Mailing Address 5080 SPECTRUM DR

City State Zip Code
ADDISON TX 75001

FEC ID number of contributing federal political committee.

C

Name of Employer
SELFOccupation
GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 19505951

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)